

A. BACKGROUND INFORMATION	CIVILIAN EDUCATION (above High School)		DATES ATTENDED		DEGREES CONFERRED		MAJOR
			FROM	TO	TITLE	DATE	
	SIGNIFICANT FOREIGN TRAVEL, LANGUAGE CAPABILITIES, HOBBIES, ETC.						
	SIGNIFICANT CIVIC RESPONSIBILITIES AND COMMUNITY ACTIVITIES						
MILITARY DECORATIONS							
B. CURRENT EMPLOYMENT	PRESENT	NAME AND ADDRESS OF EMPLOYER			KIND OF BUSINESS		
					TITLE OF POSITION		
					NUMBER OF EMPLOYEES SUPERVISED		TIME IN PRESENT POSITION
		BRIEF DESCRIPTION OF DUTIES AND RESPONSIBILITIES. INDICATE SPECIAL SKILLS AND LICENSES.					
	PREVIOUS	FROM	TO	EMPLOYER	POSITION/TITLE	BRIEF DESCRIPTION OF DUTIES	
		(Month & Year)	(Month & Year)				
C. MISCELLANEOUS PERSONAL DATA							
RESERVE UNIT ASSIGNED			BILLET ASSIGNED/TIME IN BILLET			DATE OF BIRTH	
HOME PHONE NO.	OFFICE PHONE NO.	NO. OF DEPENDENTS		SECURITY CLEARANCE/BASED ON/DATE			
HOME ADDRESS							
I certify that the data contained herein is true and correct to the best of my knowledge.				SIGNATURE		DATE	
NAME (Last, First, Middle)			RANK	SSN/DESIGNATOR	DATE OF PRESENT RANK	DATE FIRST COMMISSIONED	

PRIVACY ACT STATEMENT: The authority to request this information is contained in 5 U.S.C. 301 Departmental Regulations. The principal purpose is to obtain civilian and military information on inactive reserve officers to determine eligibility for assignment in the Naval Air Reserve Program. You are required to provide this information. Failure to do so may result in a determination that you are not eligible for assignment.

MILITARY TRAINING AND EXPERIENCE	SHORE DUTY				SEA DUTY		
	D. ACTIVE MILITARY SERVICE <i>(Do not include Organized Reserve)</i>	INCLUSIVE DATES <i>(Month &amp; Year)</i>	COMMAND/ ACTIVITY	DUTIES <i>(Primary &amp; Collateral)</i>	INCLUSIVE DATES <i>(Month &amp; Year)</i>	TYPE SHIP/ SQUADRON	DUTIES <i>(Primary &amp; Collateral)</i>
	E. ORGANIZED RESERVE ASSIGNMENTS	INCLUSIVE DATES <i>(Month &amp; Year)</i>	SQUADRON/UNIT LOCATION	DUTIES	INCLUSIVE DATES <i>(Month &amp; Year)</i>	SQUADRON/UNIT LOCATION	DUTIES
F. ACDUTRA	FROM <i>(Month &amp; Year)</i>	TO <i>(Month &amp; Year)</i>	UNIT/TRAINING ACTIVITY	LOCATION ACDUTRA PERFORMED	DUTIES/COURSE (S) TAKEN		

G. NAVY AND CIVILIAN FLIGHT EXPERIENCE													
SIGNIFICANT NAVAL AVIATION EXPERIENCE PILOT/NFO/FLIGHT SURGEON													
MODEL	HOURS	C/LS	PC DESIG	YR FLOWN	TOTAL HOURS	TOTAL JET HOURS	HRS LAST 5 YEARS	TOTAL C/LS	CIVILIAN FLYING HOURS				
									S.E. PROP	M.E. PROP	JET	HELO	
					DATE OF DESIGNATION								
					HTA		NFO/TYPE						